PTO/SB/08A (04-03)

Approved for use through 04/30/2003. OMB 0651-0031
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	Substitute for form 1449/PTO			Complete if Known			
				Application Number			
	INIEODMA	TION DI	SCI OSLIDE	Filing Date			
INFORMATION DISCLOSURE				First Named Inventor	Samuel GOLDSMITH		
			APPLICANT	Art Unit			
	(Use as	many sheets as	necessary)	Examiner Name			
	Sheet 1	of	1	Attorney Docket Number	TUS0273		

	I a			DOCUMENTS		
Examiner Initials*	Cite No. ¹	Document Number Number-Kind Code ^{2 (f known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	
		^{US-} 5,942,026	08/24/1999	Erlichman et al		
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		^{US-} 5,810,896	09/22/1998	Clemens		
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		FORE	IGN PATENT DOCU	MENTS		
Examiner Initials*	Cite No.1	Foreign Patent Document	Publication Date	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages	
		Country Code ³ Number ⁴ Kind Code ⁵ (if known)			Or Relevant Figures Appear	
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Examiner		 	-	Date		
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